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WENDEROTH, LIND & PONACK, L.L.P. 2033 K STREET N. W. SUITE 800 WASHINGTON, DC 20006-1021				(25)	Ce I hereby certify that the States Postal Service addressed to the Mai transmitted to the USI	rtificate of Mailing or Tran his Fee(s) Transmittal is bein with sufficient postage for fir il Stop ISSUE FEE address PTO (703) 746-4000, on the	smission g deposited with the Un rst class mail in an envel a above, or being facsim date indicated below.	
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APPLICATION NO.	FILING DATE		FIRST NAMED INVEN			ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/090,786	03/06/2002	Junichi Kimura			-	2002_0273A	7157	
TITLE OF INVENTION: MODULE AND METHOD OF MANUFACTURING THE MODULE 07/30/2004 SHASSENZ 00000111 10090786								
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APPLN. TYPE	SMALL ENTITY	· ISSUE FEE		PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330)		\$300	\$1630	10/15/2004	
· EXAMINER ART UN			NIT CLASS-SUBCLASS		ASS-SUBCLASS	1		
TRAN, THANH Y 282			7 361-736000					
1. Change of correspondenc CFR 1.363). Change of correspond Address form PTO/SB/1. "Fee Address" indicati PTO/SB/47; Rev 03-02 Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. WENDEROTH, LIND & PONACK, L.L.P.							
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Matsushita Electric Industrial Co., Ltd. Osaka, Japan								
Please check the appropriate assignee category or categories (will not be printed on the patent); \Box individual \mathbf{X} corporation or other private group entity \Box governm								
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):								
v				MA check in the amount of the fee(s) is enclosed. Check No. 63193				
☐ Advance Order - # of	☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number(enclose an extra copy of this form).							
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(Authorized Signature) Couple M. Josh (Date) 7/29/04

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